



HONOLULU ETHICS COMMISSION
925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768
Email: ethics@honolulu.gov
Website: <http://www.honolulu.gov/ethics/>

HONOLULU
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31-7-19
19 JAN -4 P 4:00

2019 REGISTRATION

Lobbyist Registration
(Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) ORMAN, LINDSAY E.		
LOBBYIST FIRM/EMPLOYER (if applicable) STARN O'TOOLE MARCUS & FISHER		TELEPHONE (808) 537-6100
MAILING ADDRESS (No. and Street or P.O. Box) 733 BISHOP STREET, SUITE 1900		FAX (808) 537-5434
		EMAIL lorman@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) HILTON		TELEPHONE (703) 883-1000
MAILING ADDRESS (No. and Street or P.O. Box) 7930 JONES BRANCH DRIVE		FAX
		EMAIL
(City) MCLEAN	(State) VIRGINIA	(Zip Code) 22102
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		<input checked="" type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		<input checked="" type="checkbox"/> Not Applicable

PART II.B NO LONGER LOBBYING	
<input type="checkbox"/> I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<input checked="" type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input checked="" type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input checked="" type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Other (indicate below):		

PART IV LOBBYIST CERTIFICATION

I hereby certify that the foregoing statements are true and correct.

LOBBYIST SIGNATURE

DATE

12/31/18

Subscribed and sworn to before me

This 31st day of December, 2018

By:

NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS

My commission expires:

6/29/2018

PART V AUTHORIZATION TO LOBBY

NAME ERICA GORDON		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED VICE PRESIDENT, GOVERNMENT AFFAIRS
NAME OF ORGANIZATION (if applicable) HILTON		TELEPHONE (703) 883-5382
MAILING ADDRESS (No. and Street or P.O. Box) 7930 JONES BRANCH DRIVE		FAX
		EMAIL erica.gordon@hilton.com
(City) MCLEAN	(State) VIRGINIA	(Zip Code) 22102
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.		
(Signature of Authorizing Officer or Person Represented)		(Date) 11/31/19

NOTARY CERTIFICATION STATEMENT

Doc. Date: 12-31-18 ☐ Undated at time of notarization

Document Description: Honolulu Ethics Commission - 2019
Lobbyist Registration Form (Lindsay E. Orman)

No. of Pages: 3

Jurisdiction: First Judicial Circuit
Honolulu, Hawaii

Bernadette A. Lee 12-31-18
Signature of Notary Date of Notarization and
Certification Statement

Bernadette A. Lee
Printed Name of Notary



(Official Stamp or Seal)

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2019 REGISTRATIONLobbyist Registration
(Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) ORMAN, LINDSAY E.		
LOBBYIST FIRM/EMPLOYER (if applicable) STARN O'TOOLE MARCUS & FISHER		TELEPHONE (808) 537-6100
MAILING ADDRESS (No. and Street or P.O. Box) 733 BISHOP STREET, SUITE 1900		FAX (808) 537-5434
		EMAIL lorman@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

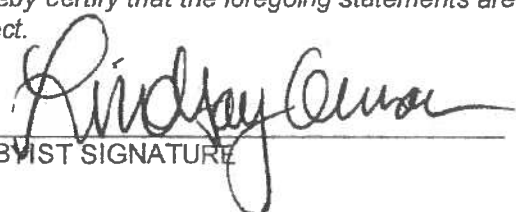

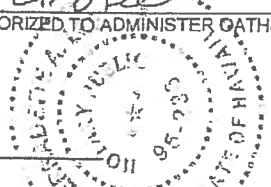
PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) PARK HOTELS & RESORTS INC.		TELEPHONE (571) 302-5757
MAILING ADDRESS (No. and Street or P.O. Box) 1775 TYSONS BLVD., 7TH FLOOR		FAX
		EMAIL
(City) TYSONS	(State) VIRGINIA	(Zip Code) 22102
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		<input checked="" type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		<input checked="" type="checkbox"/> Not Applicable

PART II.B NO LONGER LOBBYING	
<input type="checkbox"/> I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

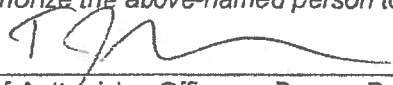
PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<input checked="" type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input checked="" type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input checked="" type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Other (indicate below): _____		

PART IV LOBBYIST CERTIFICATION

<p>I hereby certify that the foregoing statements are true and correct.</p> <p> LOBBYIST SIGNATURE</p> <p>12/31/18 DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>31st</u> day of <u>December</u>, <u>2018</u>.</p> <p>By:  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires: <u>6/29/2019</u></p> 
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PART V AUTHORIZATION TO LOBBY

NAME THOMAS J. BALTIMORE, JR.		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED PRESIDENT & CEO	
NAME OF ORGANIZATION (if applicable) PARK HOTELS & RESORTS INC.		TELEPHONE (571) 302-5757	
MAILING ADDRESS (No. and Street or P.O. Box) 1775 TYSONS BLVD., 7TH FLOOR		FAX	
		EMAIL	
(City) TYSONS	(State) VIRGINIA	(Zip Code) 22102	
<p>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</p> <p> (Signature of Authorizing Officer or Person Represented)</p> <p>1/6/19 (Date)</p>			

NOTARY CERTIFICATION STATEMENT

Doc. Date: 12-31-18 ☐ Undated at time of notarization

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Lobbyist Registration Form (Lindsay E. Orman)

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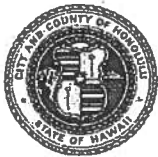
Bernadette A. Lee 12-31-18
Signature of Notary Date of Notarization and
Certification Statement

Bernadette A. Lee

Printed Name of Notary



(Official Stamp or Seal)

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19 JAN -8 P12:38**2019 REGISTRATION**Lobbyist Registration
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NAME (Last) (First) (Middle) ORMAN, LINDSAY E.		
LOBBYIST FIRM/EMPLOYER (if applicable) STARN O'TOOLE MARCUS & FISHER		TELEPHONE (808) 537-6100
MAILING ADDRESS (No. and Street or P.O. Box) 733 BISHOP STREET, SUITE 1900		FAX (808) 537-5434
		EMAIL lorman@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

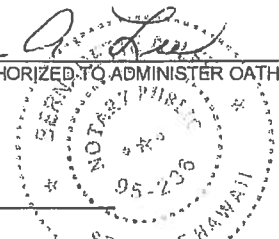
PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TURTLE BAY RESORT, LLC		TELEPHONE (808) 293-6000
MAILING ADDRESS (No. and Street or P.O. Box) 57-091 KAMEHAMEHA HIGHWAY		FAX
		EMAIL
(City) KAHUKU	(State) HAWAII	(Zip Code) 96731
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		<input checked="" type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		<input checked="" type="checkbox"/> Not Applicable

PART II.B NO LONGER LOBBYING	
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<input type="checkbox"/> Other (indicate below):		

PART IV LOBBYIST CERTIFICATION

<p>I hereby certify that the foregoing statements are true and correct.</p> <p><u><i>Arindya Cemon</i></u> LOBBYIST SIGNATURE</p> <p><u>12/31/18</u> DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>31st</u> day of <u>December</u>, <u>2018</u>.</p> <p>By: <u><i>Bernadette A. Lee</i></u> NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires: <u>6/29/2019</u></p> 
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PART V AUTHORIZATION TO LOBBY

NAME GERARD C. GIBSON		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED VICE PRESIDENT
NAME OF ORGANIZATION (if applicable) TURTLE BAY RESORT, LLC		TELEPHONE (808) 293-6000
MAILING ADDRESS (No. and Street or P.O Box) 57-091 KAMEHAMEHA HIGHWAY		FAX
		EMAIL
(City) KAHUKU	(State) HAWAII	(Zip Code) 96731
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.		
<u><i>Gerard C. Gibson</i></u> (Signature of Authorizing Officer or Person Represented)		<u>1/5/19</u> (Date)

NOTARY CERTIFICATION STATEMENT

Doc. Date: 12-31-18 ☐ Undated at time of notarization

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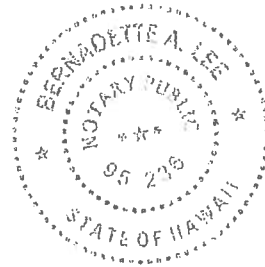
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